

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/579,272

FILING DATE

APPLICATION

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		1					52						
3		1 2					53						
4		2 1					54						
5		1 2					55						
6		2 1					56						
7		1 ⊕					57						
8		⊕ 1					58						
9		1 ⊕					59						
10		⊕ 1					60						
11		1 ⊕					61						
12		⊕ 1					62						
13		⊕ 1					63						
14		⊕ 1					64						
15		1 ⊕					65						
16		⊕ 1					66						
17		1 ⊕					67						
18		⊕ 1					68						
19		1 ⊕					69						
20		⊕ 1					70						
21		1 ⊕					71						
22		⊕ 1					72						
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46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1	↓		↓		↓	TOTAL IND.	↓		↓		↓	
TOTAL DEP.	21	←		←		←	TOTAL DEP.	←		←		←	
TOTAL CLAIMS	22						TOTAL CLAIMS						

Best Available Copy